

CERTIFICATE OF MAILING

hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 09/22/05

Marianne Boland
Marianne Boland

In Re Application of:

Ramachandran, et al.

Serial No.: 10/696,626

Filed: October 29, 2003

For: **Multi-Mode Receiver**

Confirmation No.: 5553

Group Art Unit: 2634

Examiner: Wong, Linda

Skyworks Docket No.: 03SKY0003

TKHR Docket No. 051933-1110

The following is a list of documents enclosed:

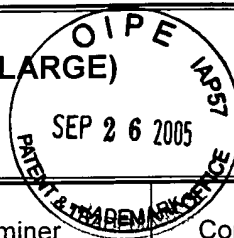
Return Postcard
Amendment Transmittal Letter (Large)
Response

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

AMENDMENT TRANSMITTAL LETTER (LARGE)

Applicant(s): **Ramachandran, et al.**

Skyworks Docket No. **03SKY0003**
TKHR Docket No. **051933-1110**



Serial No. 10/696,626	Filing Date October 29, 2003	Examiner Wong, Linda	Confirmation No. 5553	Group Art Unit 2634
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Invention: **Multi-Mode Receiver**

Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450

Transmitted herewith is a Response in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	33 -	33 =	0	X \$50.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0	X \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0.00
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0.00
Other Fees:					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.



David Rodack, Reg. No. 47,034

9-22-05

Date



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Ramachandran, *et al.*

Serial No.: 10/696,626

Filed: **October 29, 2003**

Confirmation No.: **5553**

Group Art Unit: **2634**

Examiner: **Wong, Linda**

Skyworks Docket No. **03SKY0003**

TKHR Docket No. **051933-1110**

For: **Multi-Mode Receiver**

RESPONSE

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

The non-final Office Action mailed July 21, 2005 (Part of Paper No. 2) has been carefully considered. In response thereto, please enter the following amendments and consider the following remarks.

AUTHORIZATION TO DEBIT ACCOUNT

It is not believed that extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 20-0778.